

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
OFFICE CLASSIFIER		19	8301
FORMALITY REVIEW	24	1120	2-31-01
RESPONSE FORMALITY REVIEW	Request	925	10-29-01

INDEX OF CLAIMS

Rejected N
 Allowed 1
 (Through numeral) Canceled A
 Restricted 0
 Non-elected
 Interference
 Appeal
 Objected

Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions
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932
 08-31-01
 525
 10/29/01